DLN: 93493320032212

Form **990** 

Department of the Treasury

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2011

OMB No 1545-0047

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

	revenue						Inspection					
		2011 calendar year, or tax year beginning 01-01-201:  C Name of organization	1 and ending 12-31-201	1	D Employe	r identifi	cation number					
_		SUNSET GROVE COUNTRY CLUB INC										
_	dress ch	Doing Business As		—	74-168 E Telephor		r					
_	me cha				(409)8	83-9392	2					
Init	ial retu	Mumber and street (or P O box if mail is not deliver 2900 SUNSET DRIVE	red to street address) Room/s	uite	<b>G</b> Gross rece							
Tei	mınate	d 2900 SONSET DRIVE		ł	<b>C</b> 01033 100	Σιρεσ ψ 1, ι	23,731					
— Am	ended	return City or town, state or country, and ZIP + 4 ORANGE, TX 77630	1	_								
— Apı	olication	n pending										
		<b>F</b> Name and address of principal officer		H(a) Is this	s a group re	turn for						
				affilia			┌ Yes					
				H(b) Are all	affiliates in	cluded?	┌ Yes ┌ No					
				1 ' '			e instructions)					
Ta	x-exem	npt status	4947(a)(1) or 527	H(c) Grou	p exemptio	n numbe	r <b>►</b>					
y W	ebsite	e:► N/A										
<b>K</b> For	n of or	ganization Corporation Trust Association Other		L Year of for	mation 1941	M Stat	e of legal domicile Ti					
	rt I	Summary				1 . 3.44	<u> </u>					
		Briefly describe the organization's mission or most sig	unificant activities									
	-	THE CLUB IS ORGANIZED FOR THE DEVELOPMENT OF SOCIAL AND RECREATIONAL ACTIVITIES THE										
ပ္	!	RECREATIONAL ACTIVITY IS GOLF										
Governance	-											
<u></u>	-											
9		Check this box 🔰 if the organization discontinued it			5% of its n	et asset:	S					
	3	Number of voting members of the governing body (Par	rt VI, line 1a)	•	<u> </u>	3	1					
န္	4	Number of independent voting members of the govern	ing body (Part VI, line 1b	)	<u> </u>	4	42					
Activities &	5	Total number of individuals employed in calendar year	r 2011 (Part V, line 2a)			5	7					
្ន	6	Total number of volunteers (estimate if necessary) .				6						
	I	Total unrelated business revenue from Part VIII, colu			<u> </u>	7a	-23,35					
	Ь	Net unrelated business taxable income from Form 990	0-T, line 34	T		7b	-23,21					
				Prio	Year	-	Current Year					
a)	8	Contributions and grants (Part VIII, line 1h)					(					
į	9	Program service revenue (Part VIII, line 2g)			1,323,03	1	1,335,869					
Revenue	10	Investment income (Part VIII, column (A), lines 3,			39	_	144					
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8			8,21	8	-10,36					
	12	Total revenue—add lines 8 through 11 (must equal 12)		ne	1,331,64	4	1,325,650					
	13	Grants and similar amounts paid (Part IX, column (										
	14	Benefits paid to or for members (Part IX, column (A					(					
	15	Salaries, other compensation, employee benefits (P										
8		5-10)			503,95	3	561,521					
Expenses	16a	Professional fundraising fees (Part IX, column (A), I	line 11e)				(					
ਡੌ	b	Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright$										
_	17	Other expenses (Part IX, column (A), lines 11a-11	.d, 11f-24e)		869,15	9	882,478					
	18	Total expenses Add lines 13-17 (must equal Part			1,373,11		1,443,999					
	19	Revenue less expenses Subtract line 18 from line	12		-41,46	_	-118,349					
Net Assets or Fund Balances					of Current ear		End of Year					
9.00 10.00 1	20	Total assets (Part X, line 16)		T	1,352,52	9	1,221,617					
4 B	21	Total liabilities (Part X, line 26)			703,91	_	658,062					
5 E	22	Net assets or fund balances Subtract line 21 from			648,61	_	563,555					
	1111	Signature Block			0 10,01		300,000					
		ties of perjury, I declare that I have examined this return.	, including accompanying s	schedules and st	atements =	nd to the	best of mv					
now	ledge a	and belief, it is true, correct, and complete. Declaration o										
VIIO M	ledge.											
		*****		20	12-11-15							
Sigr	1	Signature of officer		Da								
Her		JOHN PRATHER Treasurer										
		Type or print name and title										
		Preparer's L	Check If	Preparer's t	axpayer ıd	entification number						
Paid		signature Joel E Steirman	self- employed •	(see instruc								
	arer's	Firm's name (or yours SteirmanWhitfield & Co PC CPA		стирюуей 🕶								
Use (		ıf self-employed),			EIN 🕨							
	~···J	address, and ZIP + 4 7 109 West Camellia			Dhono ==	• (400) o	92 2250					
		Orange, TX 77630			Phone no	- (409)8	005-0050					

May the IRS discuss this return with the preparer shown above? (see instructions) .

1 0111	1990 (2011)				raye <b>z</b>
Par		nent of Program Service A Schedule O contains a response			
1	Briefly describe	e the organization's mission			
		NIZED FOR THE DEVELOPMENT	OF SOCIAL AND RECREATIO	NAL ACTIVITIES THE CLU	B'S PRIMARY
REC	REATIONALAC	TIVITY IS GOLF			
2		ation undertake any significant pro			Yes ✓ No
	If "Yes," descril	be these new services on Schedul	e O		
3	Did the organiza	ation cease conducting, or make s	ignificant changes in how it con-	ducts, any program	
					Yes 🗸 No
	If "Yes," descril	be these changes on Schedule O			
4	expenses Sect	ganization's program service acco ion 501(c)(3) and 501(c)(4) orga cations to others, the total expens	nizations and section 4947(a)(1	) trusts are required to repo	
	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	,	ATION PROVIDING GOLF COURSE, SWIMM		, ,	,
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
<b>4</b> c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	Other program	services (Describe in Schedule	0)		
	(Expenses \$		grants of \$	) (Revenue \$	)
 4е	Total program	service expenses►\$			
		- '			

Part IV	Checklist	of R	eauired	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V^{\bullet}$	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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Par	t IV Checklist of Required Schedules (continued)								
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No					
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No					
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No					
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No					
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No					
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No					
25a	5a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I								
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No					
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No					
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No					
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)								
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part								
		28a		No					
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No					
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No					
32		32		No					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No					
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No					
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		No					
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No					
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No					
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes						

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		.୮	
			Yes	No
1	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
D	<b>1b</b>			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			<b>R.</b> /
	gaming (gambling) winnings to prize winners?	1c		No
	Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year <sup>?</sup>	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities			
	account)?	4a		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	35		No
-		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
	organization solicit any contributions that were not tax deductible?			
	were not tax deductible?	6b		Νo
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g		
h	required?	79		
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		Νo
	Sponsoring organizations maintaining donor advised funds.			110
	Did the organization make any taxable distributions under section 4966?	9a		Νo
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
)	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a   1,300			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club  74,730			
	facilities			
	Section 501(c)(12) organizations. Enter  Gross uncome from members or shareholders			
	Gross income from members or shareholders			
	sources against amounts due or received from them )			
2-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
20	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
b 3	Section 501(c)(29) qualified nonprofit health insurance issuers.	l l		
b 3 a	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		No
b 3 a b	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state  Enter the aggregate amount of reserves the organization is required to maintain by	13a		No
b 3 a b	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state  Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13a		No
b a b	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state  Enter the aggregate amount of reserves the organization is required to maintain by	13a		No
b 3 a b	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state  Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  Enter the aggregate amount of reserves on hand	13a 14a		No No

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
_				
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	Yes	
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	$\vdash$	103	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	evenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		No
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		No
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
ь	Other officers or key employees of the organization	15b		No
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		No
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			

Own website Another's website V Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 JOHN PRATHER 2900 SUNSET DRIVE

ORANGE, TX 77630 (409)883-9392

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organi	•	elated o	rgan	ızatı	ons	compe	nsat	ted any current or fo	ormer officer, direct	tor, or trustee
(A) Name and Title	(B) Average hours per week (describe	Positi more unles an	<b>(</b> on (d e tha	C) o no n one son er ar	t che e bos is bo nd a	eck x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee		Ke) emplojee	Highest compensated employee	Former		MISC)	related organizations
(1) DEWEY SCOTT Director	0 00							0	0	0
(2) DEAN PRIDDY Director	0 00							0	0	0
(3) JOHN PRATHER Treasurer	0 00							0	0	0
(4) RICK KESZEG Director	0 00	х						0	0	0
(5) JOHN YOUNG Director	0 00	х						0	0	0
(6) JOE KAZMAR Director	0 00	х						0	0	0
(7) MILES HALL Director	0 00	х						0	0	0
(8) SHARON KOSBOTH Secretary	0 00	х						0	0	0
(9) RANDY BROWN Director	0 00	х						0	0	0
(10) TOM TOAL Director	0 00	х						0	0	0
(11) BART WILLIANS Vice President	0 00	х						0	0	0
(12) PETE STERLING President & CEO	0 00	х						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (describe	unles an	on (d e tha	n on son er ai	e bo ıs b nd a	x, oth		Repo compo fro organiz	( <b>D)</b> ortable ensation m the ration (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estima mount o compens from t	ated f other sation the on and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relati organiza	
1b	Sub-Total							<u> </u>						
С	Total from continuation sheets	to Part VII, Sec	tion A					•						
2	Total (add lines 1b and 1c) .  Total number of individuals (inclusion),000 of reportable compens		nited to			ted	<u>.</u> above	) who	receive	d more tha	ın			
3	Did the organization list any <b>form</b> on line 1a? <i>If</i> " <i>Yes,"</i> complete Sch								or highes	t compens	ated employee		Yes	No
4	For any individual listed on line 1 organization and related organization and related organization.	.a, is the sum of	report	able (	com	pens	sation	and				3 4		No
5	Did any person listed on line 1a services rendered to the organiza										or individual for •	5		No
	ction B. Independent Cont													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax you	the organizatio ear									ng with			
	Nan	<b>(A)</b> ne and business add	dress							Desc	( <b>B</b> ) ription of services	-	(C Comper	
												$\Rightarrow$		
												+		
	Fotal number of independent conti \$100,000 of compensation from t			ot lin	nited	d to	those	liste	d above)	who recei	ved more than			

Form 99								Page <b>9</b>
Part \	<u> </u>	Statement of	of Revenue		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
<u>*2</u> 22	1a	Federated cam	paigns 1a	ı				52.
E E	Ь	Membership du	ıes <b>1b</b>					
Contributions, gifts, grants and other similar amounts	c	Fundraising ev	ents <b>1c</b>	-				
£ a	d	Related organiz	zations 1d					
S E	e	Government grant	ts (contributions) 1e					
ોં જે	f	All other contributi	ons, gifts, grants, and <b>1f</b>					
<b>₹</b>	g	sımılar amounts no Noncash contr	ot included above ibutions included in					
달								
ပ္မ	h		s 1 a - 1 f	▶	О			
				Business Code				
Program Service Revenue	2a	GOLF SHOP		713910	78,860	78,860		
₽e	Ь	GOLF COURSE FEE	ES	713910	135,373	135,373		
- C	c	DINING ROOM	_	713910	562,316	562,316		
₹ Ž	d	CLUBHOUSE FEES	& ASSMTS	713910	559,320	559,320		
ص 2	e							
ੂੰ ਛ	f	All other progra	am service revenue					
Š	g	Total. Add line	s 2a-2f		1,335,869			
	3		come (ıncludıng dıvıden		, ,			
		and other simil	aramounts)	▶ [	144	144		
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0			
	5	Royalties .		,	0			
	_		(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
		expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)	,	0			
		Gross amount	(ı) Securities	(II) Other				
	7a	from sales of						
		assets other than inventory						
	b	Less cost or other basis and						
	c	sales expenses Gain or (loss)						
	d	Net gain or (los	ss)	<u> </u>	0			
	8a		from fundraising					
÷		events (not inc						
Other Revenue		\$ of contributions	 s reported on line 1c)					
Pe Pe			ne 18					
<u>.</u>	١.		a					
¥	b c		(loss) from fundraising	events 🕨	o			
•	9a		from gaming activities	l I				
	-		ne 19					
			а					
	b		(penses b		0			
	10a	Net income or Gross sales of	(loss) from gaming acti	vities	0			
	104	returns and all						
			a	74,730				
	Ь		oods sold <b>b</b>	98,084			<u>.</u>	
	С		(loss) from sales of inv		-23,354		-23,354	
	11a	Miscellaneou	s kevenue	Business Code 713910	600	600		
		GUEST FEES	ADCEC.	713910	12,391	12,391		
	b	FINANCE CHA	AKGES	,13910	12,391	12,391		
	C	Λ II othor =						
	d e		ue s 11a-11d	L				
		rocuit Add fille:	J 114 114		12,991			
	12	Total revenue.	See Instructions .	▶	1,325,650	1,349,004	-23,354	

#### Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 0 Grants and other assistance to individuals in the United States See Part IV, line 22 0 Grants and other assistance to governments, 3 organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members 0 5 Compensation of current officers, directors, trustees, and key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 7 Other salaries and wages 491,500 491,500 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . 0 Other employee benefits . . . . . . 24,430 24,430 45,591 45,591 10 Fees for services (non-employees) 11 Management . . . . . 0 0 Legal . . . . . . . . . 7,781 Accounting . . . . . . . . . . . . 7,781 0 Lobbying . . . . . . . . . . . . Professional fundraising See Part IV, line 17 . . 0 0 Investment management fees . . . . . . 0 g Advertising and promotion . . . 1,277 1,277 12 Office expenses . . . . . 18,999 18,999 13 14 Information technology . . . . . 0 15 Royalties . . 0 16 0 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials . . . . . . 0 0 19 Conferences, conventions, and meetings . . . . 23,596 23,596 20 21 Payments to affiliates . . . . 22 Depreciation, depletion, and amortization . . . . 84,262 84,262 68,880 23 68,880 Other expenses Itemize expenses not covered above (List 24 miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) UTILITIES 74,013 74,013 REPAIRS & MAINT BUILDING 107,042 107,042 OPERATING SUPPLIES 134,064 134,064 MERCHANDISE GOLF SHOP 69,884 69,884 FOOD AND SUPPLIES KITCHEN 176,630 176,630 All other expenses 116,050 116,050 25 Total functional expenses. Add lines 1 through 24f 1,443,999 1,443,999 Joint costs. Check here ► 🗆 If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a

Part X **Balance Sheet** (A) (B) Beginning of year End of year 0 1 1 199.861 136,435 2 2 Savings and temporary cash investments . . . . . . . 3 3 0 129.802 124.360 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . . . . . . 5 0 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 Schedule L . . . . . 6 0 7 26.433 37.993 8 9 13,686 9 16,766 Prepaid expenses and deferred charges . . . . 2,432,021 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 1,525,958 b Less accumulated depreciation . . . . 982,747 10c 906,063 0 11 11 0 12 12 Investments—other securities See Part IV, line 11 . . . . . . 0 13 13 Investments—program-related See Part IV, line 11 . . 0 14 Intangible assets . . . . . . . . . 14 15 0 15 1,352,529 1,221,617 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 77,618 50,747 17 17 Accounts payable and accrued expenses . 18 18 19 63,297 19 56,479 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L $\ldots$ . $\ldots$ . $\ldots$ 22 23 Secured mortgages and notes payable to unrelated third parties . . . 563.000 23 550.836 24 Unsecured notes and loans payable to unrelated third parties . . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 2 25 D . . . . . 26 703,917 26 658,062 **Total liabilities.** Add lines 17 through 25 . . . . . Organizations that follow SFAS 117, check here ▶ 

and complete lines 27 Balances through 29, and lines 33 and 34. 27 27 Unrestricted net assets . . . . 28 28 Temporarily restricted net assets . . . . . Fund 29 29 Permanently restricted net assets . . . . Organizations that do not follow SFAS 117, check here ▶ 🔽 and complete lines 30 through 34. ö 209,550 209,350 30 Capital stock or trust principal, or current funds . . . . . 30 Assets 65.252 61.463 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 377,599 288,953 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances . . . . . 648.612 33 563.555 34 Total liabilities and net assets/fund balances . . . . . 1.352.529 34 1.221.617

1.6	Check if Schedule O contains a response to any question in this Part XI	•			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,3	325,650
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3		- 1	118,349
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		e	548,612
5	Other changes in net assets or fund balances (explain in Schedule O)	5			33,29
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		5	563,55
Pai	The triangle of the contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b		No
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		No

#### **Additional Data**

**Software ID:** 11000144

**Software Version:** 2011v1.2

**EIN:** 74-1689236

Name: SUNSET GROVE COUNTRY CLUB INC

### Form 990, Special Condition Description:

## **Special Condition Description**

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493320032212

OMB No 1545-0047

Open to Public Inspection

## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

ハリンヒエ しょん	ROVE COUNTRY CLUB INC					n number	
MOET ON	NOTE COOMING CLOSS INC			74-1	689236		
art I	Organizations Maintaining Donor Acordanization answered "Yes" to Form 99		Similar Fu	nds o	r Accounts. C	omplete	ıf th
		(a) Donor advised fu	ınds	(l	) Funds and othe	raccount	:s
Total	number at end of year						
Aggre	egate contributions to (during year)						
Aggre	egate grants from (during year)						
Aggre	egate value at end of year						
	the organization inform all donors and donor advi s are the organization's property, subject to the	<del>-</del>		r advis		Yes	┌ No
used	the organization inform all grantees, donors, and l only for charitable purposes and not for the ben erring impermissible private benefit				purpose [	_ Yes	┌ No
rt II		if the organization answe	red "Yes" to	Form	990, Part IV, li	ne 7.	
Com	ose(s) of conservation easements held by the or Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space plete lines 2a-2d if the organization held a quali	on or pleasure)	rvation of an l	ertıfıed	ally importantly l historic structure		
ease	ment on the last day of the tax year		Г		Held at the End	d of the V	
Total	I number of conservation easements		<b> </b>	2a	rield at the Lin	a Or the r	Cai
	I acreage restricted by conservation easements		<b> </b>	2b			
	ber of conservation easements on a certified his	toric structure included in (a	,	2c			
	ber of conservation easements included in (c) ac	•	´	2d			
	, ,	. , ,	L				
Numl	her of conservation easements modified transfe	rred released extinguished	or terminated	hv the	organization dur	ına	
	ber of conservation easements modified, transfe axable year ▶	rred, released, extinguished,	or terminated	d by the	e organızatıon dur	ıng	
the ta				i by the	e organization dur	ing	
the to Numl Does	axable year ▶	tion easement is located <b>F</b> _ the periodic monitoring, ins			violations, and	<b>Yes</b>	厂 No
Numl Does enfor	axable year -  ber of states where property subject to conserva  the organization have a written policy regarding	tion easement is located <b>F</b> _the periodic monitoring, ins	pection, hand	— ling of v	/iolations, and		Γ Nα
Numl Does enfor Staff	axable year -  ber of states where property subject to conserva  the organization have a written policy regarding rement of the conservation easements it holds?	tion easement is located F_ the periodic monitoring, ins ecting and enforcing conserv	pection, handi vation easeme	— ling of v ents du	/iolations, and 「 ring the year ►		. Nα
Numl Does enfor Staff	ber of states where property subject to conserva s the organization have a written policy regarding rement of the conservation easements it holds?	tion easement is located F_ the periodic monitoring, ins ecting and enforcing conserv	pection, handi vation easeme	— ling of v ents du	/iolations, and 「 ring the year ►		. Nα
Numl Does enfor Staff Amor	ber of states where property subject to conserva s the organization have a written policy regarding rement of the conservation easements it holds?	tion easement is located the periodic monitoring, ins ecting and enforcing conserv ig, and enforcing conservation	pection, hand vation easeme on easements	— ling of v ents du during	ring the year ► the year	Yes	
Numl Does enfor Staff A mod  \$ \$ _ Does 170( In Pabalar	ber of states where property subject to conserve to the organization have a written policy regarding rement of the conservation easements it holds?  and volunteer hours devoted to monitoring, inspection of expenses incurred in monitoring, inspection to the conservation easement reported on line 2	tion easement is located Later the periodic monitoring, inspecting and enforcing conservation, and enforcing conservation (d) above satisfy the requires onservation easements in its the footnote to the organization	pection, hand vation easements on easements ments of sect revenue and	 ling of v ents du during tion expens	ring the year ► the year the year e statement, and	Yes	
Numl Does enfor Staff Amor  > \$ _ Does 170( In Pa balan the o	ber of states where property subject to conservation for comments of the conservation easements it holds?  and volunteer hours devoted to monitoring, inspecting the expenses incurred in monitoring, inspecting the each conservation easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?  art XIV, describe how the organization reports conce sheet, and include, if applicable, the text of torganization's accounting for conservation easements.	tion easement is located Later the periodic monitoring, insecting and enforcing conservation, and enforcing conservation (d) above satisfy the require conservation easements in its the footnote to the organization ents	pection, handly ation easements on easements ments of sections's financial sections's financi	— ling of v during tion expens statem	ring the year the year the year e statement, and	<b>Yes</b>	
Numl Does enfor Staff Amor  \$ 170( In Pabalar the o	ber of states where property subject to conservation for comment of the conservation easements it holds?  and volunteer hours devoted to monitoring, inspecting the conservation easement of the conservation monitoring, inspecting the conservation easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?  art XIV, describe how the organization reports conce sheet, and include, if applicable, the text of the torganization's accounting for conservation easement.	tion easement is located Later the periodic monitoring, insecting and enforcing conservations, and enforcing conservations above satisfy the require enservation easements in its the footnote to the organization ents.  In a fart, Historical Tryes" to Form 990, Part IV 116, not to report in its reverse for public exhibition, educations.	pection, handly ation easements on easements ments of section's financial section (a), line 8.	during of value during expens statem  or Oth	ring the year Lead the year  e statement, and ents that describe the that describe that describe that describe the that describe	Yes   Yes   es sets. ks of	
Numl Does enfor Staff Amor  > \$ _ Does 170( In Pa balar the o  t III  If the art, h provi If the histo	ber of states where property subject to conservation for the conservation easements it holds?  and volunteer hours devoted to monitoring, inspecting the easement of the conservation easements it holds?  and volunteer hours devoted to monitoring, inspecting the easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?  art XIV, describe how the organization reports concesheet, and include, if applicable, the text of the organization's accounting for conservation easement complete if the organization answered the organization elected, as permitted under SFAS instorical treasures, or other similar assets held	tion easement is located Lather periodic monitoring, inspecting and enforcing conservation and enforcing conservation (d) above satisfy the require conservation easements in its he footnote to the organization ents  **Mathematical Tryes** to Form 990, Part IV**  116, not to report in its reverse for public exhibition, education and a statements that description is to report in its revenue oublic exhibition, education, or a statement of the properties of the	pection, handly ation easements on easements of sector revenue and on's financial sector. In the statement are sta	during of vicents during cion expensistatem of the infurience and balandaria de incomplete and balandar	ring the year Lead of the year  the year  e statement, and ents that describe  er Similar Associations of public the year	Yes   Yes   es sets. ks of   service,	
Numing Does enfor Staff A more proving the first proving the control of the contr	ber of states where property subject to conservation for the conservation easements it holds?  and volunteer hours devoted to monitoring, inspecting the conservation easement of the conservation easements it holds?  and volunteer hours devoted to monitoring, inspecting the conservation easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?  art XIV, describe how the organization reports conservation easement reports of the conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation reports of the conservation easement reports of the conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation reports of the conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation reports of the conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation reports of the conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation reports of the conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation reports of the conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation easement reported on line 2 (h)(4)(B)(ii)?  The conservation easement reported on line 2 (h)(4)(B)(iii)?	tion easement is located Lather periodic monitoring, inspecting and enforcing conservation and enforcing conservation (d) above satisfy the require conservation easements in its he footnote to the organization ents  **Mathematical Tryes** to Form 990, Part IV**  116, not to report in its reverse for public exhibition, education and a statements that description is to report in its revenue oublic exhibition, education, or a statement of the properties of the	pection, handly ation easements on easements of sector revenue and on's financial sector. In the statement are sta	during of vicents during cion expensistatem of the infurience and balandaria de incomplete and balandar	ring the year the year the year  e statement, and ents that describe that describe the year therance of public ance sheet works cance of public se	Yes   Yes   es sets. ks of   service,	□ No
Numl Does enfor Staff Amor  * \$ _ Does 170( In Pa balar the o  rt IIII  If the art, h provi If the histo provi (i) R	ber of states where property subject to conserve to the organization have a written policy regarding rement of the conservation easements it holds? Find volunteer hours devoted to monitoring, inspecting unt of expenses incurred in monitoring, inspecting to the conservation easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?  Beach conservation easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?  Beach conservation easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?  Beach conservation easement reported on line 2 (h)(4)(B)(ii) and 170(h)(4)(B)(iii)?  Beach conservation easement reported on line 2 (h)(4)(B)(ii) and 170(h)(4)(B)(iii)?  Beach conservation easement reported on line 2 (h)(4)(B)(iii)?  Beach conservation easement	tion easement is located Lather periodic monitoring, inspecting and enforcing conservation and enforcing conservation (d) above satisfy the require conservation easements in its he footnote to the organization ents  **Mathematical Tryes** to Form 990, Part IV**  116, not to report in its reverse for public exhibition, education and a statements that description is to report in its revenue oublic exhibition, education, or a statement of the properties of the	pection, handly ation easements on easements of sector revenue and on's financial sector. In the statement are sta	during of vicents during cion expensistatem of the infurience and balandaria de incomplete and balandar	ring the year the year the year  e statement, and ents that describe that describe the year therance of public ance sheet works cance of public se	Yes  Yes  es  sets.  cks of service, of art, rvice,	⊢ No

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

► \$ \_\_\_\_\_ Schedule D (Form 990) 2011

Part IV, line 9, or reported an amount on Form 990, Part X, line 21.	Part	IIII Organizations Maintaining Co	llections of Art	, His	<u>tori</u>	cal Tr	easu	res, or O	the	<u>r Similar A</u>	\sse	ts (co	ntınued)
Provide a description of future generations  Provide a description of future generations  Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV  During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XIV, line 9, or reported an amount on Form 990, Part X, line 21.  Is still the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  If "Yes," explain the arrangement in Part XIV and complete the following table  If "Yes," explain the arrangement in Part XIV and complete the following table  If "Yes," explain the arrangement in Part XIV and complete the following table  If "Yes," explain the arrangement in Part XIV and complete the following table  If "Yes," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  In Segnating of year balance  In If "Yes," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  In Segnating of year balance  In Vesting the part XIV in the part of the year end balance held as and programs.  In Administrative expenses  In Endowment Funds not in the possession of the organization that are held and administered for the organization by the part of the internet downent Funds.  Permanent rendowment Funds and in the possession of the organization that are held and administered for the organization by the part XIV in the intended uses of the organization's endowment funds  In Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Land,	3		r records, check and	y of th	ie foll	_		_			ction		
Preservation for future generations  Provide a description of the organizations collections and explain how they further the organization's exempt purpose in Part XIV  Date of the provide a description of the organization solicit or receive donations of art, historical treasures or other similar assets to be sold for raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XI in 19. In 19. Or reported an amount on Form 990, Part XI, line 21.  Is a 1st the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XI and complete the following table    Fig.	а	Public exhibition		d	Γ	Loan	rexc	hange progr	ams				
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV  Part XIV  Part VIV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization answered "Yes" to Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21.  If 'Yes,' explain the arrangement in Part XIV and complete the following table    Family balance   It is the organization and the organization but and the organization but and the organization but and the organization that are held and administered for the organization by (i) unrelated organizations   Sa(i)	b	Scholarly research		e	Γ	Other							
assets to be sold to raise funds cather than to be maintained as part of the organization's collection?    Part IV    Escrow and Custodial Arrangements. Complete if the organization's collection?   Yes   Part IV , line 9, or reported an amount on Form 990, Part X, line 21.   Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.   Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.   If "Yes," explain the arrangement in Part XIV and complete the following table   Ic   Amount   Ic   Ic   Ic   Ic   Ic   Ic   Ic   I	С	Preservation for future generations											
Second and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    1a	4		ollections and expla	ın hov	v the	/ furthe	r the o	organization	's ex	empt purpos	e ın		
Eart   Secrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    If "Yes," explain the arrangement in Part XIV and complete the following table	5									ular	Γ,	Yes	┌ No
First   Fir	Par	t IV Escrow and Custodial Arrang	ements. Comple	ete ıf	the	organı	zatioi			es" to Form	990	,	
Mathematical parameter   Mathematical parame	1a		lian or other interme	ediary	for c	ontribu	tions	or other ass	ets r	not	Γ,	Yes	┌ No
1	b	If "Yes," explain the arrangement in Part XI $^{\circ}$	/ and complete the	follow	ıng ta	able		_					
d Additions during the year    Ending balance								_		,	4 mou	<u>nt</u>	
te Inding balance  2a Did the organization include an amount on Form 990, Part X, line 21?  2b Inding balance  2c Did the organization include an amount on Form 990, Part X, line 21?  2c Did the organization include an amount on Form 990, Part X, line 21?  2d Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  2 Display balance  2 Display balance  3 Display balance  4 Display balance  5 Display balance  6 Display balance  7 Display balance  8 Display balance  9	С	Beginning balance							<b>1</b> c				
The properties of the reganization include an amount on Form 990, Part X, line 21?   The properties of the organization include an amount on Form 990, Part X, line 21?   The properties of the organization answered "Yes" to Form 990, Part IV, line 10.	d	Additions during the year							1d				
Date the organization include an amount on Form 990, Part X, line 21?    Tyes	е	Distributions during the year							1e				
b If "Yes," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Calcument Year   (b)Pnor Year   (c)Two Years Back   (d)Three Years Back   (e)Four Years III	f	Ending balance							<b>1</b> f				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  (a)Current Year (b)Pnor Year (c)Two Years Back (d)Three Years Back	2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?							Γ,	Yes	┌ No
Calcurrent Year   Calcurrent	b	If "Yes," explain the arrangement in Part XIV	<i>(</i>										
1a Beginning of year balance	Pai	t V Endowment Funds. Complete											
b Contributions			(a)Current Year	(b)	Prior \	/ear	<b>(c)</b> Tw	o Years Back	(d)	Three Years Bac	k (e)	Four Ye	ears Back
to Investment earnings or losses	1a	Beginning of year balance							<u> </u>		┿		
d Grants or scholarships	b								<u> </u>		┿		
e Other expenditures for facilities and programs	С								<u> </u>		_		
and programs	d	·							<u> </u>		4		
f Administrative expenses	е	•											
per End of year balance	f	•							$\vdash$		+		
a Board designated or quasi-endowment ▶  b Permanent endowment ▶  c Term endowment ▶  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	_	· ·							╁		+		
Board designated or quasi-endowment ►  Permanent endowment ►  Term endowment ►  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	_	,							<u> </u>				
Term endowment ►  Term endowment ►  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	2		r end balance neld a	as									
Term endowment ►  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations .	а	Board designated or quasi-endowment 🕨											
Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	b	Permanent endowment 🕨											
Yes   Note   N	С												
(i) unrelated organizations	3 <b>a</b>	•	ssion of the organiza	ation	that a	re held	and a	idministered	for	the	ı	V	N <sub>2</sub>
(ii) related organizations											a(i)	res	NO
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 3b   4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property					•	• •	•		•				
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book violated depreciation  (d) Book violated depreciation  (e) Accumulated depreciation  (f) Accumulated depreciation  (g) Cost or other basis (other)  (h) Book violated depreciation  (h) Book violated depre	b	•				ule R?	٠		٠. '	· · · -			
1a         Land         L	4	Describe in Part XIV the intended uses of th	e organization's end	dowme	ent fu	nds							
Description of property       basis (investment)       basis (other)       depreciation       (d) Book vision         1a Land       805,532       805         b Buildings       805,532       805         c Leasehold improvements       1,388,214       1,388         d Equipment       238,275       1,525,958       -1,287	Par	VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa	rt X,	line 1	0.						
b Buildings       805,532       805         c Leasehold improvements       1,388,214       1,388         d Equipment       238,275       1,525,958       -1,287		Description of property								` '		<b>(d)</b> Bo	ok value
c Leasehold improvements       1,388,214       1,388         d Equipment       1,388,214       1,388         e Other       238,275       1,525,958       -1,287	<b>1</b> a l	and		•							$\neg \uparrow$		
c Leasehold improvements       1,388,214       1,388         d Equipment       1,388,214       1,388         e Other       238,275       1,525,958       -1,287	b E	Buildings						805	,532		$\neg \uparrow$		805,532
d Equipment		<b>J</b>									$\dashv$		1,388,214
<b>e</b> Other		·						, , ,			$\neg \dagger$		
								238	,275	1.525	,958		1,287,683
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)......... ▶ 90€				nn (B)	, line	10(c).)		<u> </u>			+		906,063
Schedule D (Form 990)		22 (20.2 (a) onotice equal (		(2)	,	(-/•/	- •	<u> </u>	-		L a D (F	orm 9	

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(-,	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Other		
<b>7.</b> 1-1 (Colored (1) decide cond. 5 - 2000, 9 - 4 V cold (9) (colored (2) V cold (2) V cold (2) V cold (2) (colored (2) V cold (2) (colored (2) V cold (2) V colored (2) (colored (2) V colored (2)	<b>F</b>	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)  Part VIII Investments—Program Related. Se		13
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
<b>7</b> 1-1 (0 / (1) / (1) (1) ( (1) / (1) ( (1) / (1) / (1) ( (1) /	<b>*</b>	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. See Form 990, Part X, I		
(a) Descri		(b) Book value
Total (Column (b) should agual Form 900, Part V, cal (P) line	15 )	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part		
1 (a) Description of Liability	<b>(b)</b> A mount	
Federal Income Taxes	(2) / Illiounic	
redefai income raxes		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )		
3 Fin 49 (ACC 740) Footpote In Bart VIV provide the to		

Part XI, Line 8

	Identifier Return Reference Expl	nation	
add	ditional information		
Part	t V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also compl		
	mplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	1 Dart IV	lines 1 h and 2 h
5 Par	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	. 5	
C E	Add lines 4a and 4b	. 4c	
b	Other (Describe in Part XIV)		
a h	Investment expenses not included on Form 990, Part VIII, line 7b 4a	$\longrightarrow$	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
3	Subtract line <b>2e</b> from line <b>1</b>	. 3	
e	3	. 2e	
d	Other (Describe in Part XIV)		
C C		$\overline{}$	
b			
a h			
	Donated services and use of facilities		
2	statements	1	
1	Total expenses and losses per audited financial	1	
Part	t XIII Reconciliation of Expenses per Audited Financial Statements With Exper	ses per	Return
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	. 5	
С	Add lines <b>4a</b> and <b>4b</b>	. 4c	
b	Other (Describe in Part XIV) 4b		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
3	Subtract line <b>2e</b> from line <b>1</b>	. 3	
e	Add lines <b>2a</b> through <b>2d</b>	. 2e	
d	Other (Describe in Part XIV) 2d		
c	Recoveries of prior year grants		
b	Donated services and use of facilities		
а	Net unrealized gains on investments		
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
1	Total revenue, gains, and other support per audited financial statements	1	
Par	TEXII Reconciliation of Revenue per Audited Financial Statements With Revenue	ıe per R	eturn
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
9	Total adjustments (net) Add lines 4 - 8	9	
8	Other (Describe in Part XIV)	8	
7	Prior period adjustments	7	
6	Investment expenses	6	
5	Donated services and use of facilities	5	
4	Net unrealized gains (losses) on investments	4	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	

Part XI, Line 8 Other Changes in

Net Assets or Fund Balances

PRIOR PERIOD PREPAID INSURANCE \$3402 Prior period fixed assets \$26435 TREASURY STOCK \$ -2800 Unrestricted

Fund change \$ -0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493320032212

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

	Employer ident if	cation number
SUNSET GROVE COUNTRY CLUB INC		
	74-1689236	

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	THE CLUB'S TREASURER PREPARES A MONTHLY FINANCIAL STATEMENT FOR THE BOARD OF DIRECTORS THE STATEMENTS ARE AVAILABLE FOR INSPECTION BY ANY SHAREHOLDER OR MEMBER ALL DOCUMENTS AND RECORDS ARE KEPT IN THE CLUB'S ADMINISTRATIVE OFFICE AND ARE AVAILABLE DURING NORMAL BUSINESS HOURS
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	THE BOARD REVIEWED THE FORM 990 BEFORE AUTHORIZING THE TREASURER TO SIGN AND FILE THE FORMS 990 AND 990T
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	THE CLUB HAS SHAREHOLDERS AND MEMBERS THE SHAREHOLDERS HAVE VOTING RIGHTS TO ELECT THE BOARD OF DIRECTORS MEMBERS PAY DUES AND ENJOY THE CLUB'S FACILITIES, BUT DO HAVE NOT HAVE A VOTE FOR THE ELECTION OF OFFICERS OR OTHER MATTERS CONCERNING CLUB ASSETS OR DEBTS
		Client Note 1 - The Sunset Grove Country Club experienced a defalcation for the years 2009, 2010, & 2011 of approximately \$111,000 which are recorded as operating expenses. The amount has not been adjusted to show the theft as a separate line item at this time. Once the audit for 2010 is concluded if there is a change for purposes of computing the Form 990T, an amended Form 990 will be submitted for filing.